PTO/SB/17 (12-04)
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Effective on 12/08/2004. Peos Bursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known					
FEE TRANSMITTAL For FY 2005				Application Number		10/7	10/722,754		
				Filing Date		November	November 26, 2003		
				First Named Inv	entor/	Ralph	Ralph I. Larson		
X Applicant claims small entity status. See 37 CFR 1.27				Examiner Name	€	Terrell L	Terrell L. McKinnon		
				Art Unit 3743					
TOTAL AMOUNT OF PAY	(MENT (\$)	510		Attorney Docke	t No.	HIT-0	19BUS		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 50-0845  Deposit Account Name: Daly, Crowley, Mofford & Durkee, LLP									
Deposit Account Deposit Account Number: 50-0845  Deposit Account Name: Daly, Crowley, Mofford & Durkee, LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
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FEE CALCULATION									
BASIC FILING, SEARCH, AND EXAMINATION FEES     FILING FEES SEARCH FEES EXAMINATION FEES									
Application Type	<u>Sı</u> Fee (\$)	nall Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity	Fees Paid	/ <b>e</b> \	
Utility	300	150	500	250	200	Fee (\$) 100	1 000 1 010	74,	
Design	200	100	100	50	130	65		<del></del> [	
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300	-		
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FE	ES		_	J	·	Ü	Sm	all Entity	
Fee Us Fee (\$) Fee (\$)									
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100									
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180									
Total Claims Extra Claims		Fee (\$)		Paid (\$)	Multiple D	le Dependent Claims			
- 20 or HP = HP = highest number of total Indep. Claims	Extra Claims	•		0 Paid (\$)	Fee (\$)	\$)			
- 3 or HP =		x =		0					
HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)									
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
<u>Total Sheets</u> - 100 =	Extra Sheet 0	<u>s Number</u> / 50 =	of eac	h additional 50 o					
A OTHER FEE(C)									
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)									
Out There Manual Francisco of Time									
UBMITTED BY	1/1/1.	213	· · · · · · ·	Pagistration No.	·				
ignature /	/W/4	1/		Registration No. (Attorney/Agent)	37,303	Telephone	781.401.998	8 ext. 11	
lame (Print/Type)	Christoph	S. Daly				Date	5 hU60	5	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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AUG 2 9 2005 W

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.

10/722,754

Confirmation No.: 7292

**Applicant** 

Ralph I. Larson

Filed

: November 26, 2003

T.C./A.U.

3743

Examiner

Terrell L. McKinnon

Docket No.

HTI-019BUS

Customer No.:

022494

Certificate of Mailing (37 C.F.R. 1.8(a))

I hereby certify that this correspondence is being transmitted via facsimile to Commissioner for Patents at 571-273-8300 or deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date set forth below.

25 AUG 65

Date of Signature and Mail Deposit

By:

Christopher S. Dal

Reg. No. 37,303

## REQUEST FOR EXTENSION OF TIME

MS Amendment Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

Sir:

It is requested that the time for response to this Office Action dated February 25, 2005 be extended for a three-month period of time to end August 25, 2005, under the provisions of 37 C.F.R. §1.136. The fee of \$510.00 called for by 37 C.F.R. §1.17 is enclosed herewith.

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In the event any additional fee is required, please charge such amount to the Patent and Trademark Office Deposit Account No. 50-0845.

Dated:

25 AUG05

Respectfully submitted,

Daly, Krowley, Mofford & Durkee, LLP

Bv:

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